Medical equipment required by some hospitals in A. P.

297. SHRI P. UPENDRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether valuable medical equipment required by some hospitals in Andhra Pradesh is not being imported because of the delay in the grant of import duty exemption;

(b) what is the number of applications for such examin exemption are pending from various States; and

(c) what are the reasons for delay in clearing the relevant files?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) to (c) The procedure for grant of import duty exemption for hospital equipment was being reviewed so as to ensure full compliance with the provisions of the relevant notifications. The pending applications are now being processed expeditiously.

Filling up of the post of Director General of Health Services

298. SHRI SHANTI TYAGI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the post of Director General of Health Services is lying vacant for the last many months;

(b) if so, the reasons therefor; and

(c) by when Government propose to fill this post and appoint a Director General?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) to (c) The post of Director General of Health Services fell vacant on 1.10.1992. The filling up of the post was held up on account of some representations. Efforts are being made to fill up the post expeditiously.

दिल्ली में आंत्रशोथ के कारण भारी संख्या में हुई मौतें

299. श्री गोपाल सिंह जी० सोलंकी
श्री राम सिंह राठवा :

क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या यह सच है कि इस वर्ष दिल्ली में आंत्रशोथ बीमारी के फैलने से भारी संख्या में व्यक्ति मौत के शिकार हुए हैं ;

(ख) यदि हां तो गत वर्ष और इस वर्ष मई और जून माह के दौरान आंत्रशोथ बीमारी के कितने मामले प्रकाश में आए हैं ;

(ग) उक्त अवधि के दौरान हैजा बीमारी के कितने मामले प्रकाश में आए हैं ; और

(घ) इन बीमारियों को फैलने से तथा महामारी का रूप धारण कर लेने से रोकने हेतु क्या कदम उठाये गये हैं ?

स्वास्थ्य और परिवार कल्याण मंत्री (श्री बी० शंकरानन्द) : (क) और (ख) राष्ट्रीय राजधानी क्षेत्र दिल्ली सरकार द्वारा दी गई सूचना के अनुसार दिल्ली में मई–जून 1992 तथा 1993 के दौरान आन्त्रशोथ के रोगियों की संख्या एवं उससे होने वाली मौतें इस प्रकार हैं :–

1992		1993	
रोगी	मौतें	रोगी	मौतें
मई 7602	2	10109	3
जून 6633	5	7884	2

(ग) मई और जून, 1993 के दौरान क्रमश: 126 तथा 120 हैजे के रोगियों

की सूचना दी गई जिसमें कोई मौत शामिल नहीं है ।

(घ) ऐसे प्रकोपों को रोकने के लिए राष्ट्रीय राजधानी क्षेत्र, दिल्ली सरकार द्वारा उठाए जा रहे कदम इस प्रकार हैं:—

1. इन रोगों की निगरानी एवं मानिटरिंग ।
2. सुरक्षित पेय जल की सप्लाई ।
3. मानव मल, कूड़े के ढेर, व्यर्थ वस्तुओं इत्यादि का सुरक्षित ढग से निपटान ।
4. मुखीय जलपूर्ति उपचार को बढ़ावा देना।
5. स्वास्थ्य शिक्षा उपायों को सुदृढ़ करना ।

Recommendations of the Bhor Committee

300. SHRI MENTAY PADMANABHAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the recommendations of the Bhor Committee on National Health and Fam Planning have not been fully implemented;

(b) if so, the steps proposed to reverse this trend;

(c) whether it is also a fact that there has been of late, general neglect of rural areas vis a vis urban centres in allocation of public funds; and

(d) if so, what steps are proposed to remedy this imbalance?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) and (b) The recommendations of the Bhor Committee date back to 1946 and the norms suggested at that time have been adopted to the extent considered feasible, aid supplemented by the advice of other expert Committees.

(c) and (d) No Sir. Investment on the rural health infrastructure has grown rapidly, with a substantial increase in the number of Primary Health Centres (from 1 per 100,000 to 1 per 30,000 today) and Community Health Centres.

The Eighth Five Year Plan aims at consolidating the infrastructure by way of filling vacant posts, improving supplies of drugs, equipments and consumables.

Availability of pure blood for Aids patients in Hospitals

301. CHOWDHRY HARI SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government propose to launch a major programme to make pure blood available at the hospitals in view of the increasing number of AIDS cases; and

(b) *if so, the details thereof?*

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) Yes, Sir.

(b) To ensure supply of safe and infection -free blood for transfusion in the hospitals, Government have launched a comprehensive programme for testing of blood for HIV by setting up 180 Zonal Blood Testing Centre all over the country. Linkages have been provided to all the Government private and Voluntary Blood Banks. Rapid Testing Kits are provided to the district level transfusion Centres. The rules under Drugs and Cosmetics Act for inspection of Blood Banks have been revised and made more stringent. It now provides for compulsory testing of blood for blood transmissible deseases. The concurrence of the Drug Controller (India) has been made mandatory both for issue and renewab of ficences. All the 608 Government Blood Banks are also being modernised in a phased manner.

Spread of Aids in the State of Assam

302. SHRI DIGVIJAY SINGH:
SHRI ISH DUTT YADAV:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state: